

PLACES: Sharon, Windsor, Vt.  
ENTER ALL DATA IN THIS ORDER:  
DATES: 14 Apr 1794  
To indicate that a child is an ancestor of the person submitting the sheet, place an "X" behind the number pertaining to that child.

FAMILY GROUP RECORD

HUSBAND

Tracy LANE

Born

Place

Chr.

Place

Marr.

Place

Died

Place

Bur.

Place

HUSBAND'S FATHER

HUSBAND'S MOTHER

HUSBAND'S OTHER WIVES

WIFE

Janet KELLY MD

Born

Place

Chr.

Place

Died

Place

Bur.

Place

WIFE'S FATHER

WIFE'S MOTHER

WIFE'S OTHER HUSBANDS

SEX

M

F

Li

G

1

2

3

4

5

6

7

8

9

10

11

SOURCES

Husband

Wife

Ward Examiners: 1. 2.

Stake or Mission

NAME

REL

FOUR

DATE

B


HUS

WIF

N DIED MONTH YEAR

Tracy LANE

Janet Kelly



te and Temple)

HUSBAND

ate and Temple)

TO PARENTS

SHORT HISTORY ON:

1. Janet R Lane Kelly Tracy A Lane 6-6-85

Your Full Name

Husband's Full Name

Date

a. 2/14/47 Omaha, Nebr

Birthdate

Birthplace

Death Date

Death Place

b. James V Kelly Ruth E Nelson

Father's Full Name

Mother's Full Maiden Name

2. Schools attended or other special training (name & dates):

Carroll College Waukesha Wis. '65-69 U. of Ill College of Medicine '69-73

3. Occupation(s) (Please list where you or person have worked and give approximate dates:

Mary Mahoney Memorial Health Center '73-'76 U. of OK Hospitals '73-'76 U. of Utah '81-'83 Private Practice Heber 183-'85

4. Occupation of their or your husband or wife:

Systems analyst

5. Hobbies or free time activities, interests, etc.:

Skiing, gardening, raising horses, mother

6. Positions held (Church, and civic, etc.):

Med. Director, Heber Valley Care Center; Group discussion coordinator United Methodist Church

7. Military Service (Where and When, Etc.):

Assistant Professor, U. of UT N/A " " U. of OK.

8. Mission work or other special church work (where and when, etc.):

9. Achievements, recognitions, talents, honors, etc.(in sports, music, art, education, drama, business, vocation, etc. where and when received):

Thespian, Phi Beta Kappa

10. Interests or faith promoting experiences, travel, etc.:

FROM 1600

P.O. Box 1187

Scappoose, OR ZIP # 97056

Dr. Janet R Kelly

color wall pict

B

First

NECESSARY EXPLANATIONS

## HUSBAND

*Tracy LANE*

Born \_\_\_\_\_ Place \_\_\_\_\_  
Chr. \_\_\_\_\_ Place \_\_\_\_\_  
Marr. \_\_\_\_\_ Place \_\_\_\_\_  
Died \_\_\_\_\_ Place \_\_\_\_\_  
Bur. \_\_\_\_\_ Place \_\_\_\_\_

HUSBAND'S FATHER \_\_\_\_\_

HUSBAND'S  
OTHER WIVES \_\_\_\_\_

HUSBAND'S  
MOTHER \_\_\_\_\_

Husband

Wife

*Janet LANE KELLY*

Ward  
Examiners:

1.  
2.

Stake or  
Mission

## WIFE

*Janet KELLY (physician & Surgeon)*

Born \_\_\_\_\_ Place \_\_\_\_\_  
Chr. \_\_\_\_\_ Place \_\_\_\_\_  
Died \_\_\_\_\_ Place \_\_\_\_\_  
Bur. \_\_\_\_\_ Place \_\_\_\_\_

WIFE'S FATHER \_\_\_\_\_

WIFE'S OTHER  
HUSBANDS \_\_\_\_\_

WIFE'S  
MOTHER \_\_\_\_\_

SEX M F	CHILDREN List each child (whether living or dead) in order of birth Given Names SURNAME	WHEN BORN			WHERE BORN			DATE OF FIRST MARRIAGE TO WHOM	WHEN DIED		
		DAY	MONTH	YEAR	TOWN	COUNTY	STATE OR COUNTRY		DAY	MONTH	YEAR
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											

*Plans to open office in Heber Utah  
Heber care center  
On staff @ Rest Home*

*1983*

SOURCES OF INFORMATION

OTHER MARRIAGES

NECESSARY EXPLANATIONS

